1	HOUSE BILL NO. 117
2	INTRODUCED BY T. HENRY
3	BY REQUEST OF THE DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES
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5	A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING NEWBORN HEARING SCREENINGS AND
6	EDUCATION; AMENDING SECTIONS 53-19-401, 53-19-402, AND 53-19-404, MCA; AND REPEALING
7	SECTION 53-19-403, MCA."
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9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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11	Section 1. Section 53-19-401, MCA, is amended to read:
12	"53-19-401. Purpose. The purposes of this part are:
13	(1) to provide early detection of hearing loss in newborn infants as soon after birth as possible to enable
14	children, their families, and primary health care providers to obtain any necessary multidisciplinary evaluation,
15	audiologic assessment, treatment, and intervention services at the earliest opportunity and to prevent or mitigate
16	the developmental delays and academic failures associated with late identification of hearing loss; and
17	(2) to provide the state with the necessary information to effectively plan, establish, and evaluate a
18	comprehensive system of appropriate services for newborn infants <u>and children</u> who have a hearing loss or who
19	are deaf <u>or hard of hearing</u> ."
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21	Section 2. Section 53-19-402, MCA, is amended to read:
22	"53-19-402. Statewide universal newborn hearing screening, tracking, and intervention program.
23	(1) There is a universal newborn hearing screening program in the department of public health and human
24	services. The department shall implement the program to encourage ensure a hearing screening test for all
25	newborn infants to undergo for identification of newborn infant hearing loss. The department shall encourage
26	implement the program to ensure newborn infant hearing screening tests to be are completed before discharge
27	from a hospital or no later than 3 months <u>1 month</u> after birth.
28	(2) The department shall adopt rules to:
29	(a) determine the volume of births that would allow a hospital or health care facility to be exempt from
30	providing newborn infant hearing screenings onsite before discharge;

1	(b) develop information for and procedures by which health care providers, local health departments,
2	health care clinics, school districts, and other appropriate resources may promote the importance of the screening
3	of newborn infants' hearing and provide information regarding locations where screenings may be accessed for
4	those newborn infants either not born in a hospital or who do not receive a screening in a hospital; and
5	(a) ensure that Montana hospitals EACH LICENSED HOSPITAL, HEALTH CARE FACILITY, OR HEALTH CARE
6	PROVIDER providing obstetric services:
7	(i) complete newborn hearing screenings for all infants before discharge or no later than 1 month after
8	birth; AND REPORT THE RESULTS TO EACH INFANT'S PRIMARY CARE PROVIDER, INCLUDING ANY RECOMMENDATION FOR
9	AUDIOLOGIC ASSESSMENT FOR AN INFANT WITH TWO FAILED HEARING SCREENINGS; AND
10	(ii) provide required education regarding hearing screenings and hearing loss; and
11	(iii) make referrals for audiologic assessment for any newborn identified by screening as requiring
12	assessment;
13	(b) ensure monitoring of all babies screened in Montana and referred for audiologic assessment to
14	ensure that they receive an audiologic assessment by 3 months of age;
15	(c) establish newborn hearing screening protocols that are objective and physiologically based;
16	(d) establish education protocols;
17	(c)(e) determine any additional establish reporting requirements that are related to newborn infant hearing
18	screening, evaluation, audiologic assessment, treatment, and intervention services. referral RECOMMENDATION
19	for audiologic assessment, and audiologic assessment results; AND
20	(f) ensure the electronic sharing of audiologic evaluation information of infants diagnosed as deaf or hard
21	of hearing with the Montana school for the deaf and blind, pursuant to the school's responsibility for intervention
22	tracking as provided in 20-8-102; and
23	(g) otherwise implement this part.
24	(3) The department shall assist hospitals <u>EACH LICENSED HOSPITAL</u> , <u>HEALTH CARE FACILITY</u> , <u>OR HEALTH CARE</u>
25	PROVIDER PROVIDING OBSTETRIC SERVICES in developing systems for reporting and in accessing funds to purchase
26	hearing screening equipment by providing information on funding sources known to the department.
27	(4) The department may accept contributions, gifts, grants, or endowments from public or private sources
28	for the use and benefit of this program."
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Section 3. Section 53-19-404, MCA, is amended to read:



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1 "53-19-404. Required education -- screening -- reporting. (1) Each licensed hospital, health care 2 facility, or health care provider that provides obstetric services shall provide education to parents of infants born 3 in the hospital or health care facility of the importance of screening the hearing of newborn infants and providing 4 followup care. Education is not considered a substitute for the hearing screening. 5 (2) Every licensed hospital, health care facility, or health care provider that provides obstetric services 6 shall report quarterly to the department of public health and human services and to the task force the following 7 information and any other information required by rule: 8 (a) the number of infants born in the hospital; 9 (b) the number of infants screened; 10 (c) the number of infants who passed the screening, if administered; 11 (d) the number of infants who did not pass the screening, if administered; 12 (e) the number of infants who received followup care; and 13 (f) the number of infants with hearing impairment. 14 (2) Every licensed hospital or health care facility that provides obstetric services shall: 15 (a) perform newborn hearing screenings, including screening of infants transferred into the hospital or 16 health care facility from another hospital or health care facility, unless the transferring facility has already 17 performed the screening; 18 (b) report monthly to the department the following information and any other information required by rule: 19 (i) the number of infants born in the hospital or born outside of the hospital and transported or transferred 20 to the hospital or health care facility; 21 (ii) the number of infants screened, including those infants born outside of the hospital or health care 22 facility and transported or transferred to it from another hospital or health care facility or screened as part of a 23 cooperative agreement with health care providers providing obstetric services in their service area; 24 (III) THE NUMBER OF INFANTS NOT SCREENED AND THE REASON EACH INFANT WAS NOT SCREENED, IN 25 ACCORDANCE WITH REPORTING REQUIREMENTS; 26 (iii)(IV) the number of infants who passed the screening; and 27 (iv)(v) the number of infants referred for audiologic assessment WHO DO NOT PASS THEIR SCREENINGS AND 28 THE CONTACT INFORMATION FOR THE PRIMARY CARE PROVIDER WHO WAS NOTIFIED OF THE SCREENING RESULTS FOR 29 EACH INFANT WHO DID NOT PASS THE SCREENINGS. 30 (3) Every licensed audiologist performing audiologic evaluations of infants identified by hearing screening



1	as needing audiologic assessment shall report monthly to the department the following information and any other
2	information required by rule:
3	(a) the identity of infants referred to them for audiologic assessment;
4	(b) the referring person or health care facility;
5	(c) the birthing facility in which the infant was born; and
6	(d) the results of the audiologic assessment of each infant referred to them."
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8	NEW SECTION. Section 4. Repealer. Section 53-19-403, MCA, is repealed.
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